



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 5559

|   |   |                               |   |                            |                                |
|---|---|-------------------------------|---|----------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/562,129  | <b>FILING OR 371(c) DATE</b><br>12/15/2005<br><b>RULE</b>   | <b>CLASS</b><br>601           | <b>GROUP ART UNIT</b><br>3768   | <b>ATTORNEY DOCKET NO.</b> |                                |
| <b>APPLICANTS</b><br>Premindra Anthony Chandraratna, Rancho Palos Verdes, CA;   |   |                               |   |                            |                                |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/US04/19498 06/18/2004 which claims benefit of 60/479,416 06/18/2003   |   |                               |   |                            |                                |
| <b>** FOREIGN APPLICATIONS *****</b>  |   |                               |   |                            |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b><br>** 04/28/2006   |   |                               |   |                            |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Verified and Acknowledged <i>Helene Bor</i> <i>HB</i><br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWING</b><br>4  | <b>TOTAL CLAIMS</b><br>27  | <b>INDEPENDENT CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>Premindra A Chandraratna<br>30932 Marne Drive<br>Rancho Palos Verdes, CA90275   |   |                               |   |                            |                                |
| <b>TITLE</b><br>Ultrasound devices and methods for treating ischemia and other cardiovascular disorders   |   |                               |   |                            |                                |
| <b>FILING FEE RECEIVED</b><br>475   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                            |                                |